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13 March 1980

WORLDWIDE REPORT

EPIDEMIOLOGY

No. 178

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HAITI, DOMINICAN REPUBLIC JOIN FORCES TO COMBAT MALARIA

Meeting Goals, Participants

Santo Domingo LISTIN DIARIO in Spanish 15 Jan 80 pp 1, 12

[Article by Jose Ramon Arias]

[Text] The secretary of Public Health held a meeting yesterday with officials from the Ministry of Health of Haiti for the purpose of making joint plans to fight malaria in this country.

Dr Jose Rodriguez Soldevila met with Dr Serge Armand, director of the National Service for Major Endemic Diseases (SNDE) of Haiti, and with Eng Demetrio Gaman, director of the National Malaria Eradication Service of the Dominican Republic.

Rodriguez Soldevila exchanged information and impressions with Doctor Armand as an initial step in coordinating the existing programs against malaria in Haiti and in the Dominican Republic.

Officials and advisers from the Pan American Health Organization (PAHO) and the World Health Organization (WHO) participated in the meeting, which took place in the Public Health conference room.

Dr Rodriguez Soldevila showed Doctor Armand and others present by means of a map the advances that far achieved through the Public Health policy of bringing health services to the countryside through the establishment of rural clinics.

On 9 January 1979 the secretary of Health stated that there is a high incidence of malaria or yellow fever [Sic] in the Dominican Republic, at the same time that he announced his organization's intent to combat it "vigorously."

He attributed the incidence of malaria to the Haitians who enter the country illegally, escaping health controls established by Dominican authorities.

Rodrigues Bolduvila expressed the health authorities' concern over the incidence of malaria and said that he has ordered the competent departments of his Ministry to take appropriate measures to counteract this situation.

Representing Haiti at the meeting were: Jacques Agenor, health educator; Dr Eberle D. Prophete, from the Epidemiological division, Dr Jacques Desbrosses, SNEM official, and Dr Marc Solis, entomologist.

From PAHO and WHO were Doctors K.C. Liang, a medical official stationed in Washington, Bernard Feinstein, entomologist; Antonio L. Benitez, a specialist stationed in Haiti.

In addition, Roger G. Grenier, a U.S. malaria advisor from the Agency for International Development (AID) and the epidemiologist Robert Fontaine from the Center for the Control of Infectious Diseases in Atlanta, Georgia were present.

On the part of the Dominican Republic: Ernesto Caffaro, an official of [illegible]; Dr Fermin Cury, epidemiologist; and Carlos A. Pacheco, a PAHO/WHO adviser for the program against malaria in the country.

Facts Reported, Measures Outlined

[illegible] Santo Domingo EL CARIBE in Spanish 17 Jan 80 p 8

[Text] The manager of the National Malaria Eradication Service stated yesterday that this year 2,000 cases of malaria have been recorded in this country.

Mr Nini Caffaro stated at the same time that the greatest problem faced by the organization, a branch of the Ministry of Public Health, is that the vehicles available to them are truly "scrap metal," 20 years old.

Nevertheless, he said, 4 years ago there were only 300 recorded cases of malaria in the country and there are about 60,000 recorded cases in Haiti.

He added that the SNEM has a budget of RD $1,200,000 whereas in Haiti the budget is RD $2,400,000.

He said the National Malaria Eradication Service has personnel totaling 140 while Haiti has more than 1,000.

He stated that Haitians who come for the sugar cane harvest are treated in their own country and that treatment continues to be available here.

He stated that the Haitians that cause the problem are those who enter illegally, those who engage in the harvesting of rice and coffee.

[illegible] to combat the problem. Dr Patrick Mai, a delegation from Haiti, headed by Dr Serge Albouy, Director of the [illegible] Service for Malaria Diseases, met recently with Deputy Dean, Director of the National Malaria Eradication Service, to coordinate a plan.

Jeffers stated that a study is being made of pilot measures to be taken with regard to the problem of migrant Haitians infected with malaria for the purpose of putting emphasis on these areas in Haiti.

He said that outbreaks have occurred in this country in Georgetown, Esperanza, Uganda, and have been contained. He added that all cases discovered are treated, including those that are discovered in health centers.

He said that this has now been a problem mainly among Haitians and that some health centers are being taught how to give this treatment.

The director of the National Malaria Eradication Service explained that [illegible] test techniques at most [illegible] have since helped to discover outbreaks through testing.

"In places where there are outbreaks, the area is sprayed and all preventive measures will [illegible] can be given from house to house. Then those houses are kept under treatment for a period of 5 months," he stated.

The preventive measures carried out are fumigation with Malathion, and then DDT is applied. In addition, the population is given chloroquine tablets.

Malaria symptoms are frequent chills followed by high fever, due to microscopic parasites in the red blood cells, and sometimes jaundice.

Among the cases the disease is called are pernicious malaria, quartan, intermittent fever, [illegible] fever. It is transmitted to man through the bite of the [illegible] mosquito or through a blood transfusion from a person with the disease.

If the malaria is chronic it causes diarrhea, pain in the limbs and other complications. Jeffers maintained that if Haitian authorities put emphasis on the affected areas in that country they would solve 90 percent of the problem.

As to the illegal entry by Haitians, he indicated that the solution would be greater vigilance on the part of both governments.

In regard to the problem of the refugees, he said that because of their condition they are in excessive amount of poverty so they are not economical.

He indicated that the most significant item is the great help offered by the Ministry of Health through its minister, Dr Rev Enrique Saldanha

[redacted]

[redacted]

[redacted] REPORTS POLIO CASES

[redacted] Aires [redacted] MARCH 30 (Xinhua) -- [redacted] 30 [redacted] 10

[redacted] Salta [redacted] the [redacted] of [redacted] two cases of children with poli-
[redacted] [redacted] cases, the confirmation of which depends on the
results of laboratory tests now being performed, have been discovered and
[redacted] been confirmed by the Ministry of Social Welfare of this province.
In the face of this [redacted] vaccination plan will be started tomorrow
[redacted] does which the minister of Social Welfare himself will take to
[redacted] locality in the north of this province.

[redacted] of the confirmed cases is that of a 3 year old girl from the Bolivian
locality of Tartagal, who was treated at the Children's Hospital of this
city last year, when the serious disease was diagnosed. Later, in October
of last year, another case, that of an 8 month old boy, was confirmed in
the city of Oran, and its spread to new [redacted] since five new cases have
appeared which are being studied but which clinically correspond to polio-
myelitis.

Dr Raul [redacted] Medina, director of Epidemiology of the province, questioned
the effectiveness of the Sabin oral vaccine which is produced in this
country and maintained that "the viruses being used are losing their im-
munological capacity to produce defenses in the human body since one of the
five doubtful cases had received three doses, another two doses and the
[redacted] remaining, had received one."

The confirmed cases however, had received no vaccination.

Dr Hesper Soto, minister of Social Welfare and Maj Pablo Antonio Muller,
[redacted] governor, will travel to Oran tomorrow to initiate the vaccina-
tion program which will be extended to the entire province if the federal
government sends the necessary doses.

The [redacted] included in the program will be Oran, Iruya, Santa Rosa
[redacted], Rivadavia, Metan, Anta, Tartagal and Aguas Blancas on the Bolivian
border.

[redacted]
[redacted] 1430

[redacted]

Buenos Aires [redacted]

[redacted] The epidemiological status of the population of the Federal Capital [redacted] more favorable pattern in December than it did in November, but it [redacted] below average water levels, according to a report prepared by [redacted] Municipality of the City of Buenos Aires. In December 74 cases of [redacted] cough were reported, while in November 93 were reported.

[redacted] this regard it was recalled that all infants should be vaccinated with [redacted] doses of triple vaccine at monthly intervals starting at the age of [redacted] months. The triple vaccine includes diphtheria, tetanus and [redacted] vaccine.

[redacted] any reason a child has not been vaccinated this should be done [redacted] soon as possible, a year after the third dose, a booster shot should be administered.

Hepatitis Increase

The report discloses that the number of cases of measles has continued to [redacted] increase. There were 24 cases in December as compared to 41 in November. The measles vaccine is the specific prevention of the disease in children [redacted] should be immunized with two doses at 9 months and at 15 months of age. There were 484 cases of chickenpox in November which dropped to 290 in December.

[redacted] German measles in the month of November was already declining with [redacted] cases, in December 304 cases were reported. It was reported that there [redacted] an effective vaccine for German measles which can be administered from [redacted] months on.

Diphtheria and Tetanus

[redacted] the month of December one case of diphtheria was reported and for the entire year [redacted]

It was also reported that during the last 3 months of the year no tetanus cases were reported in Buenos Aires but that during the entire year there were 12 cases.

Both of these are very serious diseases completely preventable by routine vaccination.

Advantages to Schools

The report also states that any child entering elementary school should receive a dose of the double tetanus and diphtheria vaccine. If he has been previously immunized with four doses of triple vaccine this single dose of double vaccine is sufficient to provide immunity during the entire period of elementary school. But if the previous immunizations were incomplete he should receive three doses of the double vaccine at monthly intervals.

Other vaccinations required for admission to school are the Salk polio vaccine, one dose, and the tuberculosis BCG, one dose.

These immunizations are administered without charge at all the municipal hospitals for acute diseases, at children's hospitals, at the Rawson Hospital and at the Santa Maternity Hospital.

Yours
[illegible]

BRIEFS

[redacted]--Australian army scientists have cultivated a fungus they claim will kill malaria and encephalitis-carrying mosquitoes. The fungus, at the Federal Army Laboratories in Melbourne, has only been able to produce small amounts of the fungus in the past 8 years. But now, using penicillin-fermenting tanks at the scientific center, they have been able to make 750 liters of the fungus extract containing spores they say are deadly to mosquitoes. The amount yielded is enough to allow full-scale tests later this year on mosquito breeding grounds around Australia. [Text] [Melbourne Overseas Service in English 1230 GMT 8 Feb 84 OW]

CSO: 5400

BRIEF

[illegible] The population of Beni and Tumupa in Latacia Province in the department, [illegible] appeal the government for urgent help to combat an outbreak of measles which has killed 15 people in the two towns. The poor condition of the roads is causing fear that more people will die before help arrives. [illegible] Radio Fides network in Spanish
[illegible]

[illegible]

[illegible]

[illegible] in Portuguese 9 Feb 81 p 20

[illegible] Even if the present number of places [illegible] this year in the country's [illegible] medical schools is maintained, Brazil will not meet the standard recommended by the [illegible] doctors for every 10,000 inhabitants--until the end of this decade. By the end of this year, we will be short by 14,000 doctors.

A report entitled "Analysis of the Problem Posed by the Number of Doctors in Brazil," written by Prof Mario Chaves and presented at the ninth meeting of the Brazilian Medical Education Association, disputes the thesis defended by the Ministries of Health and Social Security, that "although there are [illegible] distributed, there is a surplus of doctors in Brazil." The report [illegible] basis for the implantation of a preventive measure.

[illegible] Professor Chaves study, staff members of the two ministries have drafted a document in which they point to a "sharp rise" in the number of doctors at the beginning of the 1970's, for a labor market that was totally unprepared to receive them, resulting in the "false premise" of a doctor surplus in Brazil.

"The great number of doctors trained in that period has still not managed to meet the country's needs, but it led to a climate of manpower with such problems as underutilization, underemployment and reduced salaries," the document states.

According to that document, on the theory that the number of doctors and medical school admissions was too high, there were proposals to cut back that number, and to shorten the length of service for retirement, as a way of retiring doctors from the labor market sooner.

Mario Chaves feels that although it was not been well regulated, the increase in the number of doctors has a positive side. In his opinion, it is essential to promote better distribution and use of doctors, and to adapt their training to the realities of Brazilian medicine and health care, with emphasis on the training of general practitioners and on collective care. [illegible] Ministry officials feel this will be possible only with the institutionalization of health services in accordance with the general directives of Minister Waldyr Arcoverde. In cooperation with the Ministry of Welfare and Social Security, Arcoverde is seeking to establish a national network of basic health services throughout the country by 1985.

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

[illegible]

[illegible]

[illegible] INFANT MORTALITY IN NORTHEAST CAUSE OF PREVENTIVE

[illegible] Paulo [illegible] ESTADO DE SAO PAULO in Portuguese 3 Feb 81 p 16

Text Official statistics show that 2% percent of infant deaths in the Northeast in 1979 were caused by gastrointestinal disorders, but the figures do not reveal that, with correct diagnosis and medication, these disorders could have been treated. Considering the great importance that has been attributed to infectious diarrheas, several scientists have been working more recently to identify the enteropathogens causing the infections.

To introduce diagnostic techniques that can be applied by the more modest laboratories in this region (most diagnoses are currently made only in research laboratories), the Department of Immunology of the Federal University of Maranhao, with the support of CAPES (Office of Coordination for Training of Higher-Level Personnel), has promoted a special course in microbiology, which ends this morning. Graduate students in medical and paramedical fields were instructed in the most advanced techniques, with excellent indications for utilization. Conducting the course were Prof A Antonio G Pestana de Castro and Prof Margarette Simoes, of the University of Campinas (UNICAMP), specialists in the field. UNICAMP's works on microbiology have been translated worldwide, and its discoveries are of great medical importance.

The 1-month course included classes in practice and theory. The professors say that the professionals who are going to work in and around Sao Luis will now have more and better opportunities to establish a simplified technique for identification of enteropathogenic colibacilli, thus greatly reducing the infant mortality rates resulting from poorly diagnosed gastroenteritis.

Professor Pestana said he has made an intensive study of colibacilli producing enterotoxins, carriers of the so-called adhering antigens, enabling the bacteria to fix on the intestinal walls, producing toxins and causing diarrheas which can be fatal, particularly in young children, if not treated in time.

[illegible]
CSO: [illegible]

[illegible]

Polio in Campinas

[illegible] O ESTADO DE SAO PAULO in Portuguese 25 Jan 82 p 20

[Text] Campinas--The Rivers Ribeiro complex in Campinas registered another case of poliomyelitis in the city yesterday afternoon. This was the eighth child to contract infantile paralysis in January alone. The child, just a year old, lives in Jardim dos Oliveiras, on the outskirts of Campinas, and was moved yesterday to the Emilio Ribas hospital in Sao Paulo even before the case was even reported to the Regional Health Division.

Meanwhile, in Santa Antonio de Posse, in the Campinas area, the medical director of the health center denied there was an epidemic in that small town, despite the appearance of three cases this month. According to the doctor, they were isolated cases and there was no proof of contagion. "It was only a coincidence that all these cases occurred here," he said, and noted that many mothers "neglect" to bring their children in for the full series of polio vaccine.

Polio Feared in Lins

[illegible] O ESTADO DE SAO PAULO in Portuguese 1 Feb 82 p 21

[Text] Lins--Secretary Flavio da Silva, regional director of the Lins health center, said yesterday that "the poliomyelitis epidemic ought to approaching its end." It is confirmed that Lucia de Fatima Dias Reis, aged 2, has the disease.

Dr Ivo Kawazoe, the attending physician, reported that all the symptoms indicate that the child has contracted poliomyelitis. Since she was placed in isolation at Santa Casa Misericordia, pending the results of the analyses which are being conducted in Bauru.

[redacted]

[redacted]

[redacted]

[illegible] Professor Zerbini agrees with the strategy outlined by the ministry, consisting of a "lightning operation" to vaccinate the greatest number of children (about 20 million) in the shortest time.

[illegible] who briefed content with the press, has not yet said how long he will remain in Brasília, nor has he said whether he will be paid to serve as consultant to the Health Ministry. He told the minister only that he "will remain in Brasília long enough to define the strategy for the poliomyelitis vaccination program."

[illegible], Reagan tourism

Rio de Janeiro O GLOBO in Portuguese 28 Jan 86 p 4

[Text] Brasília [illegible]—Brazil will manufacture measles vaccine within a year, and will produce polio vaccine by the end of the Figueiredo administration, according to a cooperation contract signed yesterday between the Brazilian and Japanese governments.

Japan will supply the "cepa-chave," the raw material for the manufacture of measles vaccines, as well as the equipment and technology for the production of the two vaccines, and will provide $600,000, in three annual parcels of $200,000.

For its part, Brazil will handle the diffusion of the "cepa-chave" developed by the Japanese, and will train technicians for quality control in production. The proposal was presented to Health Minister Waldyr Arcoverde by a Japanese commission which came to Brazil to examine the possibilities for production of the vaccine, and the proposal was immediately approved.

The major finding of the Japanese technicians was that Brazil is in a position to produce the basic vaccines, through the Oswaldo Cruz Foundation. According to the Japanese, Brazil needs the supply of enzymes used in production for quality control.

Brazil will produce measles vaccine within a year, meeting the country's needs, with Japan providing the "cepa-chave," equipment and the hardware and material needed to start the program.

[illegible]
[illegible]

ANTIMALARIA CAMPAIGN LAUNCHED IN NORTH, TWO CASES IN PARANA

Malaria Campaign

[illegible] Portuguese [illegible]

[illegible] Brasilia [illegible]--The Ministry of Health is designing an antimalaria program, to be conducted in Acre, Amazonas and Para and the territories of Roraima, Rondonia and Amapa, where 90 percent of the country's malaria cases appear.

The program will adopt a special strategy for the territory of Roraima, the region affected most, with over 60,000 cases (or percent of all cases in the nation) last year. The large incidence of malaria in that area is the result of the intense migratory flow, which has tripled the population there in 3 years.

In the course of the campaign, the already-existing health units will be used to support the antimalaria drive, which will especially diagnosis and treatment of the disease. In Rondonia, the program will be carried out through the integrated action of SUCAM [Superintendency of Public Health Campaigns, Ministry of Health], the SESP [special Public Health Service] foundation and the government of the territory.

According to Jose Pinto Lima, superintendent of SUCAM, "the malaria problem is not confined to the health sector, because a major factor is the lack of proper housing for the population." He explained that SUCAM commits the disease by fumigating the dwellings "which cannot be done efficiently, since most of the people live in wood-or straw-side walls, which hampers the spraying operation."

Also asked that IBDF [National Department of Water and Sanitation] will take part in the program, conducting basic sanitation operations in Porto Velho, and that, in addition to allocating 40 million cruzeiros to control the disease, the Ministry of Health will send malariologist Benedito Pinto da Costa and two scientists from the Pan-American Health Organization to the region.

Malaria in Parana

[redacted]

[redacted] Curitiba--Two cases of malaria have been identified in the region of Londrina, among the 20 families removed from the islands of the Parana River, despite the extensive vaccination operation conducted by the State Health Secretariat. With no change in the last 24 hours, the river's water level is still 4.7 meters above normal and is beginning to present conditions favorable for the spread of diseases.

After touring the islands that are still partially flooded, Levi Alves Fernandes, mayor of Londrina, reported yesterday that many areas, particularly the low-lying ones, are giving off a very strong stench.

The problem is further complicated in that most of the families have remained in their flooded houses on the islands, living with the filth which the flood water are beginning to form. In Londrina, vaccination teams are using jeeps to go around the islands, as operation which the mayor admits is difficult and slow. The stationary flood waters are preventing the disinfection of wells, ashes, pens and grounds.

[redacted]
[redacted] bmh

[illegible]

[illegible]--Florianopolis, 27 Feb (AFP)--The health secretariat has reported that there were 200 polio cases in the state of Parana in the last 3 months of 1979. Some cases have also been reported in the state of Santa Catarina, and in the state capital Florianopolis 50,000 children were vaccinated in the last 3 days. [PY/72220 Paris AFP in Spanish 1701 GMT 27 Feb 80 PY]

[illegible]

BRIEF

INFLUENZA SPREADS IN WESTERN SLOVAKIA--Bratislava, CTK--The anti-influenza committee of the Ministry of Health in the Slovak Socialist Republic yesterday [21 February] dealt with developments in the incidence of influenza. During last week the number of influenza cases in the East Slovak region has markedly decreased. In the Central Slovak region their number has remained stationary. In the last 2 weeks the number of flu cases reported in Ostrava and the West Slovak region has been gradually increasing. On the whole, last week 4 percent more cases were reported than in the preceding week. The course of the illness continues to be mild. Supplies of medical drugs and the necessary medical care have been insured. (AU2716130 Bratislava TASR in Slovak 20 Feb 80 p 3 AU)

CSO: 2400

[illegible] VACCINATION CAMPAIGN ANNOUNCED

Children, Young Adults Included

Havana [illegible] in Spanish 30 Nov 79 p 1

[text] Immunization against meningitis meningococcus--also known as [illegible] "cerebrospinal fever," and produced by a bacterium that is very widespread in the world, the meningococcus--has begun in the country's educational centers, and the goal of the Ministry of Public Health [MINSAP] is to immunize the entire population of less than 20 years of age before the end of 1979, according to the announcement.

[illegible] MINSAP's National Program on Hygiene and Epidemiology Dr Hector Terry stated that in Cuba cases of meningitis meningococcus have been treated for a long time. "Thus it does not constitute a new disease in our midst."

The massive immunization measure which have been taken as a result of the fact that in recent years an increase in the number of cases has been observed, occurring in a larger proportion among children and young adults.

According to a medical definition, meningitis meningococcus is transmitted in a manner similar to that of other respiratory-disease-causing agents: by person-to-person contact; it is localized in the individual's nasopharyngeal tract, and only in the sick person but also, and most importantly, in the carrier, that is, those who harbor the germ but do not show any apparent clinical symptoms.

Once the germ passes from the higher respiratory passages to the blood, it attacks until the meninges membranes which cover the nervous system. Since this is the most frequent and alarming area affected, it gives the disease [illegible] its name.

This meningeal condition can appear in the first 24 or 48 hours of the disease's development and in this phase the patient experiences headaches, vomiting, high fever, alterations of consciousness and in occasion, purplish or reddish spots on the inside of the thighs and arms.

The case is known," said Dr Berry, "as the clinical condition described as [illegible] the presence of the meningococcus in the cerebrospinal fluid which is usually by lumbar puncture or by a blood examination [illegible]

Although this disease develops rapidly, it is felt that the effectiveness of the treatment is in direct relation to the speed with which it is diagnosed or thought of and also the speed with which the treatment of the case is initiated.

Travelers and commuter school children in the rural areas have already been vaccinated and gradually preschoolers, secondary and primary school children will be vaccinated, according to the plan established by the People's Government Organizations' Department of Health.

In the case was, children under 4 years of age will be immunized and for this purpose is directing parents to ask for information at the polyclinics, since it is necessary to gather groups of 50 children and proceed with their immunization in less than 1 hours, which is the time the vaccine lasts once the solution is prepared in a 50-dose tube.

This prevents the wasting of the vaccine, which is expensive and imported from capitalist countries.

In some polyclinics in the country, this work is being conducted after [illegible] hours. "Our other methods can be used at the rural level, conducted by our people's organizations," Dr Berry concluded.

The importance caused by the occurrence of general hygiene rules in this kind of illness was stressed.

Instructive Advertise

Source: [illegible] article in Spanish on Dec 79 p 1

Text: The parents of children under 4 years of age who are not to preschool should seek information at their polyclinics about how the vaccination campaign against meningitis meningococcus will be carried out, since it is necessary to gather the youngsters in groups of 50 and complete their immunization in less than 1 hours.

In some cases this will be being conducted starting at [illegible] hours, but in other cases, different methods can be used, such as in the [illegible] for the distance of the [illegible] areas.

The vaccination against this disease was begun in October in the educational centers and children's institutions and also in those places where a large number of persons under the age of 20 live, because they are the most susceptible to contagion.

[redacted]

FIVE HAITIAN VICTIMS DIE; ILLness, DISEASE PERSIST

Santo Domingo El NACIONAL in Spanish 17 Jan 95 p 14

[Article by Ruben Ramirez]

[Text] San Juan de la Maguana--[1] January--Five persons died in the three refugee camps which shelter victims of hurricane David and Frederick while several children and adults in these places are ill with small pox and diarrhea, so this correspondent was able to ascertain personally.

It is said the health authorities have not taken any measures to control what could be an epidemic.

The deceased are: Maria Rosario Matos, 4 months old, Deposito Valdez, 40 years old, Luis Matias Morillo, 67 years old, Dario Luis Morillo, 2 months old, and Julio Cesar Diaz, 1 year old.

Adriana Hernandez and two sisters, Altagracia and Antonia Montero, are ill.

The [illegible] quarters in which the victims of the disaster live is a cause of protest from the inhabitants of the coalition where these refugees are located.

Santiago Contreras, who said he was the spokesman for the victims, reported that all the deaths and illnesses have occurred in the Mercedes Consuelo Matos school here, and in another building across from the school.

Contreras said that the lack of medical attention is so blatant "that even at the hospital Alejandro Lebra, the victims are mistreated and they even ask them for money for medication, claiming that they do not have medicine."

The victims for the refugees reported that the government, through INESPRE (Dominican Price Stabilization Institute), is providing them with seven bags of rice and one bag of beans every 15 days but that they do not give them either oil or seasonings.

[redacted]

BRIEF:

VALCIRO [illegible] 1958--The Dominican Red Cross and the Dominican Institute of Social Security (IDSS) will carry out a "joint massive vaccination program." It was announced yesterday by the woman in charge of public relations of the Red Cross. Mrs Tomasina Gil stated that for this purpose Dr Jose Lasser Goldman, president of the Red Cross, has turned over to the IDSS 300,000 typhoid vaccines and 20,000 tetanus vaccine donated by the Austrian Red Cross to the Dominican Red Cross. A commission of the IDSS, composed of Doctors Manuel Ferrer, Manuel Tejada Holden and Rafael Martinez, received the medication. Mrs Gil reported that the program of massive vaccinations will get underway shortly. [text] [Santo Domingo El CARIBE in Spanish 1st Apr 60 p 1] 9294

CSO: 3400

RADIOACTIVE CONTAMINANT SUSPECTED IN BIRTH DEFECT

Guayaquil EL UNIVERSO in Spanish 24 Jan 86 p 9

[Article by Walter Gallibert Larreta]

[Text] An unusual event took place in the La Libertad Hospital at noon on 19 January, witnessed by Dr Miguel Montalvo Malo, who was the first one to be surprised by the horrible birth.

A woman whose name we shall omit came to the above-mentioned health center, after being sent there as an emergency case by the Manglaralto Hospital in a helicopter, which would allow her to give birth to the infant she had been carrying for the usual 9 months. This was her fourth delivery, as she had three completely normal children, and for this reason there was nothing to indicate any abnormality.

Born Alive

Dr Miguel Montalvo Malo, who was on duty, stated that when he made the incision, the infant put out an arm, and therefore he chose to help extract it by putting his hand into the patient's abdomen and pulling the body of the newborn out completely. When he saw it, the doctor felt a strange shudder run through his body, on seeing that what he held in his hands was a little monster with the face of a toad and the bulging eyes of a fish.

The physician says that he had to make an effort to recover his calm and continue with the mother's operation, ordering the assistant to try to keep the creature alive.

Dr Montalvo explained to us that the infant, was born alive but died a few moments later. He described the infant as female, anencephalic, that is, without the encephalic mass, with ocular protusion or exophthalmos, the nose flat, without nasal cartilage, sunken lower jaw, formation of the lateral teeth, without a neck, with the eyes of a fish and face of a toad, elongated arms, weighing about 9 pounds, and with the rest of the body apparently normal.

The expression on its face was so terrifying that some persons at our side, when we were taking pictures, refused to look at it.

Possible Causes

When we asked about possible causes which would explain this birth, we were told that it was impossible to know, and that a research center would have to decide. It could well be the ingestion of a common drug, or some radioactive particle carried by a fish from our seas as a result of experimental atomic explosions, which even later could cause these deformations. A serious consideration is that the damage cannot be detected when a person is pregnant, since in the present case we are considering there were no previous problems in the pregnancy during the 9 months of the normal cycle.

Other Cases

We have learned that in the La Libertad Hospital two women from the town of Santa Rosa, Salinas, also had anencephalic children, but without the deformations shown by the present case. Also, in the town of Palmar, another woman had an almost anencephalic case, with the coinciding factor that their wives all have a connection with the seashore. This is why an explanation is necessary, and why the Health Ministry is concerned that a scientific commission should be appointed to study these cases, since there could be many women pregnant with fetuses without knowing it, and this could make the women fear sexual relations and conception.

Gil
Cen. Vall

[redacted]

[redacted]

[redacted]--Eleven. Rosario Martinez Garcia, a native of this city, 7 years of age, had died in the Alejandro Tamo hospital as a result of rabies, which he contracted after a cat had bitten him in the Ciudadela Ferroviaria. According to information supplied by his parents, Gerardo Martinez, and Natalia Garcia, to the Seventh Batzoma Police Precinct, it is known that some days ago when he was playing with a cat, the animal had bitten him on the left arm, but they had not been aware of the fact. They added that at first they supposed that the marks were the result of injuries suffered in a fall, but last Monday they noticed that the arm was swollen and [illegible] was suffering severe headaches and had a fever. Yesterday, he was brought to the Alejandro Tamo hospital, where after the doctors made various tests they established that he had an advanced case of rabies, and he died in the night. The fact was reported to the Seventh Precinct, which recommended [illegible] the matter known, and ordered appropriate precautions to be carried out. On the other hand, several inhabitants of the Ciudadela Ferroviaria requested the health authorities, through the police, to start a campaign against the cats and dogs, which number 2,000, according to the latest count. [Text] [Guayaquil El [illegible] in Spanish 21 Jan 60 p 13] 613.

[redacted]

[redacted]

[redacted] AT INFILTRATION PLAGUES ACCRA HOSPITAL

Source: GHANAIAN TIMES in English 8 Feb 82 p 6

Text: [redacted]

[redacted]

BRIEFS

ANTIRABIES VACCINE IMPORTED--The National Antirabies Center reported yesterday that it is supplying human antirabies vaccine to the Haitian Ministry of Health. Dr Julio Salvador Castanos, director of the organization, stated in a memorandum that 100 series of vaccines have been donated, to be used on persons exposed to the disease of rabies in Haiti. Veterinary physician Dr J. H. Joliver Lamaniel, head of the communis and contagious diseases section of the Ministry of Health in Haiti, was recently in this country, and took steps to acquire the antirabies vaccines. Joliver Lamaniel met with Dr Castanos, and they reviewed actions taken by the closing of the mutual aid agreement between the two countries. Castanos stated that in the coming month of February a commission of Haitian experts and officials will travel to the Dominican Republic to familiarize themselves with the struggle against rabies. [Text] [Santo Domingo LISTIN DIARIO in Spanish 19 Jan 80 p 14-A] 9411

CSO: 3400

[redacted]

[redacted]

Budapest [redacted] in Hungarian 7 Feb 87 p 9

[Text] The Ministry of Health has issued instructions concerning vaccinations scheduled for 1987 and for the mandatory immunization of Hungarian citizens who will travel abroad. In this connection, officials of the Ministry of Health revealed that 2 million vaccinations are administered in Hungary annually. All newborns routinely are given BCG shots as the result of which the incidence of TB has been greatly reduced. Next, babies receive combined diphtheria, tetanus and pertussis inoculation between the ages of two months. After the age of 14 months they must be inoculated against measles. Between the ages of 2 months and 7 years they are given polio drop against polio on several occasions. Booster shots against diphtheria, pertussis and tetanus are repeated at school age and again at age 13-17 years.

The continuously updated system of immunizations, the high quality of vaccines and the cooperativeness of most parents has made outstanding results in preventive medicine possible. A negative factor is that due to the success of the program, some parents no longer recognize the importance of the immunizations or that they fail to bring in their children for the mandatory shots either through negligence or irresponsibility. This increases the possibility of the outbreak of an epidemic. Further progress demands total completion of the vaccinations and the cooperation of the parents.

This year, as in the past, official personal notification of the scheduled shots are being sent to parents. Preventive vaccination against polio is scheduled for three periods, from 10 September through 20 September, 22 October through 3 November and 8 through 13 December. This will apply to infants born between 1 July 1986 and 30 June 1987. The Ministry prescribes inoculation against cholera and yellow fever for Hungarian citizens traveling to areas where such diseases pose a threat.

The Ministry of Health has temporarily suspended the vaccination against smallpox of 18-month-old children. The future of such vaccinations will depend on national and international statistics and the opinion of the specialists in this field. However, the Ministry of Health advises Hungarians scheduled to go abroad that certain African and Asian countries still require valid proof of vaccination age'ns smallpox from foreigners entering their countries.

CSO: 2600

NEWSPAPER CONCERN ON WORK TO CONTROL LEPROSY

Madras THE HINDU in English 29 Jan 80 p 6

[Editorial "Fight Against Leprosy"]

[Text] It is a matter for concern that 27 years after the National Control Programme was launched leprosy continues to be one of the major public health problems in the country. There are a staggering 3.2 million estimated cases of leprosy but what is even more disturbing is the fact that about 372 million people live in endemic areas of leprosy. This indicates the magnitude of the problem, and unless adequate steps are taken to mount a massive and sustained offensive against this disease, there is every chance of its incidence rising. The number of leprosy control units (375) and the bed strength of a little over 30,000 in government and private hospitals put together are quite inadequate for the purposes on hand. Qualitatively too the facilities are far from satisfactory. Only last year, the Director-General of Health Services, Dr. S. Banerjee, pointed out that many of the units still lacked both competence and expertise and there are no visible signs of this lacuna having been corrected. It has also been observed for long that the courses in medical colleges as constituted do not give any priority attention to leprosy as a subject of study with the result that most students are not acquainted with the nature and treatment of the disease to the required measure. This deficiency has to be overcome if trained personnel are to be made available.

The fight against leprosy has to be fought on many fronts if the results are to be impressive. For instance, the popular belief that leprosy is not curable and that it is highly infectious has to be dispelled dischtingly. Leprosy patients are treated under the outpatient and that is one important reason why those afflicted with the disease do not come out in the open for treatment, which is again a vital factor in exposing more and more people to infection. Actually 80 per cent of the cases are non infectious and drugs are available to cure them. It is therefore crucial that the public should be made clearly aware of all these facts. That would make it easier to isolate persons suffering from leprosy and induce them to take treatment without dread. At the same time, if the whole exercise is not to flop, the practice of segregating the patients within a family from the rest of the

[illegible] RISE IN MALARIA CASES

New Delhi PATRIOT [illegible]

[text] Madras, Feb 6 (PTI) - Malaria almost eradicated in 1965 under a massive eradication programme initiated in 1958, has reappeared in "alarming proportions," according to Dr V. Pattamavan, Director, National Malaria Eradication Programme.

Dr Pattamavan, who was addressing a two-day symposium and workshop on malaria organised by the Central Council for Research in Ayurveda and Siddha here today, urged the research scholars in Indian medicine to evolve a drug which could not only be effective against some of the malaria parasites now resistant to the conventional anti-malarial drugs but also help save valuable foreign exchange spent on import chloroquine.

Anti-malarials worth about Rs 20 crore were being imported every year now, the "P falciparum malaria", otherwise known as malignant malaria, which affects the brain and causes death within three days, was showing resistance to chloroquine in north eastern parts of the country, Dr Pattamavan said.

[illegible] 15 lakh malaria cases had been reported last year as against 6+ lakh in 1976, Dr Pattamavan said. However, deaths due to the disease had not been controlled. Malaria claimed 1970 lives last year.

Lack of research was one of the prime reasons for this predicament, Dr Pattamavan said. Malaria research was considered a 'backward subject' It was in India that malaria research was started about 50 years ago leading to such programmes throughout the world. The Union Government had earmarked Rs two crore per year on research but only about one-fourth of this amount was being utilised by research programmes, he said.

Dr Pattamavan said to combat the deteriorating situation the Government had formulated a "modified plan of operation" involving Rs 7+ crore per year which was about 4% per cent of the total health budget.

In addition to the disease which was spread by mosquitoes, could cause other serious social problems also. A single bout of malaria could consume [illegible] of energy which could be replenished only by an intake of about 10 kg of rice. An average Indian could not afford this and he was thus exposed to malnutrition.

So could bacterial attack on pregnant women cause low birth weight and poor brain growth of the child.

[illegible]

[illegible]

[illegible] PATNA--Patna, Jan. 24.--One in every five residents of [illegible], the biggest residential colony in south Patna, is suffering from infective hepatitis, according to a random survey. says [illegible]. The survey showed that 95 members in 30 families were down with hepatitis. In some families two, three or even four members were taken ill. A CPI member of the legislative council, Mr Chandra Mohan Nighra, yesterday submitted a list of patients to the Chief Secretary. He also showed him samples of polluted water supplied in the colony. The Chief Secretary is said to have reacted by orders of prompt action. [Text] [Calcutta THE STATESMAN in English 25 Jan 80 p 1]

[illegible] in BIHAR]--The Health Minister of Bihar Shatrughan Sah is reported on Friday that he was awaiting a report from Dr C. L. Gupta, epidemiologist of the State Health Department, who had left for Begusarai in Monghyr from where several cholera deaths had been reported. The District Health Officer of Jo-Pargana accompanied him on Friday to study the situation there. The Minister said that according to preliminary reports received by the government, there had been 11 attacks and four deaths from gastro-enteritis in Ramdhale-Bazar village between January 17 and January 24. Whether or not these were cholera cases would be known only after the medical experts submitted their reports, the Minister added. [Text] [Calcutta THE STATESMAN in English 26 Jan 80 p 16]

[illegible]

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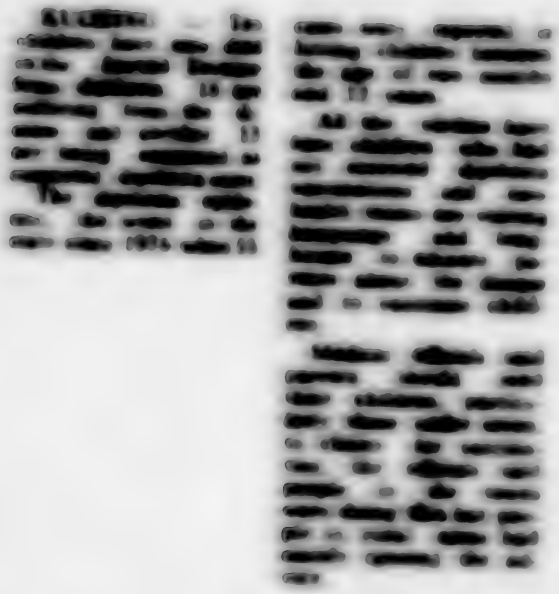


NATIVE PLANT EFFECTIVE AGAINST FUNGAL DISEASES

Bayer Company Interested

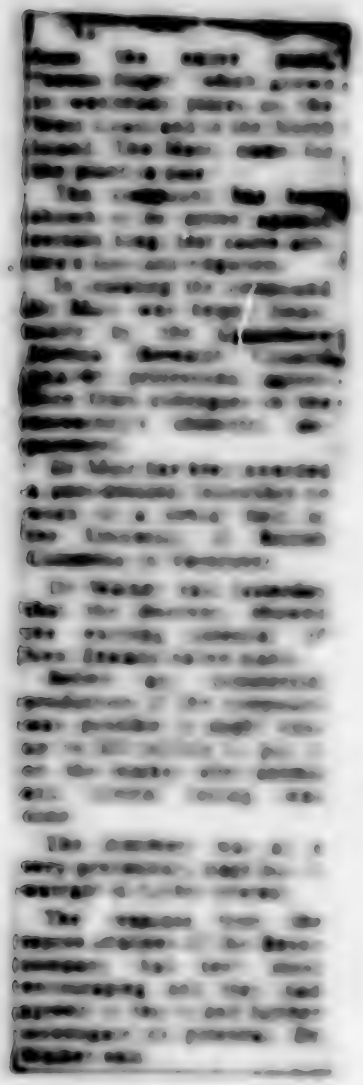
Christchurch THE PRESS in English 17 Jan 86 p 6

[Text]

Further Testing Planned

Christchurch THE PRESS in English 21 Jan 86 p 7

[Text]



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[redacted]--Tuberculosis cases increased in Christchurch last year. Forty-three cases were reported to the Health Department compared with an average of about 30 cases in previous years. During the last week in December five cases were reported. All were unrelated but the Deputy Medical Officer of Health in Christchurch (Dr T. A. Brimmell) said that the cases showed that the disease was far from being eradicated. The common carrier of the disease usually, he said, was the high incidence of tuberculosis among heavy drinkers. [illegible] Christchurch: THE PRESS in English 23 Jan 80 p 6

[illegible] TO MEDICAL SERVICES IN RURAL AREAS [illegible]

[illegible] TURKEY by Turner J. Lee [illegible]

[illegible] by Dr. Ilgaz Dereman, Istanbul University Cerrahpasa Medical School [illegible]

[illegible] when the ratio of the number of doctors to lawyers is discussed in relation to solution of the nation's health problems, what is proposed is to increase the role of general practitioners as specialists. This is the result of the misconception that the general practitioner is still performing "witchcraft as he does in African tribes."

The old idea persists that treatment consists of looking into the patient's eyes and prescribing him remedies. Another source of this faulty thinking is the proportional increase in the number of general practitioners in developed countries. The general practitioner in developed nations, however, is a doctor who, [illegible] years after graduating - physician, can perform minor surgery, make various x-ray examinations and laboratory tests, and evaluate electrocardiograms all under the name of "general health specialist;" or is, in other words, "a little bit of an expert in every branch." This type of education is now being viewed as part of a second stage in planning in order to lighten the load of basic health institutions, whose problems have not been solved in developed countries.

It is obvious how much this attention differs from that in Turkey and in the rural areas in particular.

Rural Regions

Rural health problems in rural regions are concerned with poor living conditions, inadequate water, infrastructure, services, and educational deficiencies. It is people who cannot receive adequate, well-balanced diets, who cannot be kept warm, and who live in [illegible] environments that lack sewers and for babies that have not been inoculated to be [illegible] to diseases. What must be done here is to protect the people from illness. Efforts to provide treatment after disease has taken hold are not [illegible] and effective. Establishing health centers with

[illegible] rural regions and [illegible] general practitioners in these areas are not equipped to answer [illegible] and do not provide a solution to the problem. Rural health [illegible] can be taught the people in rural regions. It would be sufficient to send health officers, nurses, and midwives here to give inoculations and to deal with problems of prevention. However, in the meantime, also required that other [illegible] within the infrastructure be corrected.

[illegible]

There are two levels of problem necessitating treatment.

a) Included in the first group, which is very limited, are illnesses like [illegible] non-contagious -- occasional diseases accompanied by fever, chronic digestive diseases, liver infections, and skin diseases. The most effective person to deal with this limited group is the general practitioner. However, it is possible to solve these problems through health officers and nurses who have passed a series of courses. (Likewise, medicine can be given the functions of handling normal births and simple [illegible].)

b) The second group that requires treatment is a very broad group that includes all surgery other than dealing with diseases and dealing with wounds, [illegible], [illegible], contagious diseases, and internal diseases that [illegible]. These types of problems could not be solved even if there were a medical specialist in the region. Solution requires a [illegible] medical specialists and a well-equipped hospital. At the very least, such a hospital should have a general surgeon, anesthetist, internist, gynecologist, radiologist, biochemist, and blood bank. At the first opportunity, a pediatrician, orthopedist, microbiologist, pathologist, ophthalmologist, and otolaryngologist should be added to complete the staff.

Long-Term Solutions

After classifying the problems according to their characteristics, it becomes clear that, besides more of a need for health [illegible] there is a need for general practitioners in order to solve problems. There is a need for many experts in various branches in particular, which is the opposite of what has been proposed to date. Although there are enough general surgeons and internists in Turkey, the number of experts in other branches is inadequate. Today, it is not possible to provide medical care to most rural villages without [illegible] or laboratory tests. Illnesses in rural regions are not different from those in cities. Therefore, well-equipped hospitals [illegible] with staffs of experts are needed here, too. From the standpoint of general productivity, these hospitals must have a number of [illegible] beds.

[illegible] health centers that have been established in administrative districts are not an adequate solution to solving problems and are not productive. These institutions are totally incapable with their staffs of

[illegible] with [illegible], [illegible], [illegible], and [illegible] for two or three [illegible]. In fact, patients staying at these institutions, which have very limited laboratory facilities, cannot be provided health services that are much different from what they would receive in their own areas.

The [illegible] required by medicine today does not make it possible to bring [illegible] resources to the patient's doorstep. Medicine in the most [illegible] centers has progressed so far that it is very unproductive to bring [illegible] resources to low population areas. For this reason, the goal of locating hospitals such as those described here and of bringing patients to these centers when necessary must be set in what is wanted to [illegible] provide citizens in rural regions with health services of an appropriate standard. If one hospital bed for every 500 persons is accepted, then one hospital for 40,000 to 50,000 persons or for an area within a distance of 30 to 100 kilometers could be planned. There are, in fact, hospitals with this bed capacity in a number of regions in Turkey. However, there have no specialists in various branches -- particularly in [illegible] and biochemistry. Reaching these centers in severe rural areas, [illegible] during the winter months, is very difficult.

[illegible]

[illegible] such as sanitation, housing, birth control, and inoculations, which require teaching, etc. In addition, [illegible] of preventive health services. The following points must be taken into consideration in order to be able to increase the effectiveness of health services directed toward treatment.

(1) Besides the setting up health centers right and left, complete hospitals that are fully equipped and that have at least 100 beds must be established.

(2) In order to train the necessary specialists for these institutions, the distribution of assistant professors at specialist-training institutions must be improved.

(3) [illegible] between hospitals and residential areas within rural areas must be ensured, and ways to reach the hospitals must be increased. Helicopters must be employed in regions in which the climate and topography are severe. There is no doubt that helicopter service would be much more economic and productive than are the wasteful, small institutions with 2 to 3 beds.

(4) Until sufficient health officers are trained, the most practical means of educating the public in basic health principles, of teaching control, of diagnosing illness, and of giving inoculations would be, in conjunction with the ministry and universities, to assign these functions to groups composed of medical school faculty members and students that would travel during the summer months.

[illegible]

SEWER RUPTURE CONTAMINATES DRINKING WATER, TYPHOID, DYSENTERY RESULT

Istanbul TERCUMAN in Turkish 21 Jan 87 p 5

[TEXT] [FEW] SERVICE -- An outbreak of typhoid has resulted from the contamination of drinking water by sewage at Vendorov Street in the Sartalepe neighborhood in Sefakoy, and it was revealed that one person has died of typhoid. According to information obtained from authorities at the Tropical Diseases Hospital, five people who live on that street were admitted to the hospital, diagnosed as having typhoid.

Vendorov Street residents said that besides those being treated at the Tropical Diseases Hospital, there was sickness in almost every house sick with a disease characterized by diarrhea which had become epidemic in the neighborhood.

The Cause

According to information obtained from people in the community, pipes supplying water to the homes had ruptured some time ago and drinking water was contaminated by open sewage. A man named Huseyin Pembe told how his daughter, Emine Pembe, had become ill the first of December and was taken to the social insurance hospital in Adapazari but was discharged after only three days. Emine Pembe's condition later worsened and her life could not be saved though she was in Cerrahpasa Hospital. Huseyin Pembe said that his wife, Hatice Pembe, also fell ill a few days later and was hospitalized at the Tropical Diseases Hospital where the diagnosis this time was "dysentery and typhoid."

Drainage

Sefakoy Mayor Aytekin Ertil has announced that the environmental pollution in Sefakoy will be cleaned up at a cost of 3[illegible] billion liras. Mayor Ertil pointed out that drainage and industrial wastes in this area had reached health-endangering proportions and said:

"We have a 10-kilometer drainage project realized through the contribution of the Sefakoy Municipality, the Provincial Bank and the Industrialists' Association. The project will collect urban wastes as well as industrial wastes."

Meanwhile, the city water identified as contaminated by sewage at Vendorov Street has been cut off for several days. The local people reportedly have now begun to drink well water and this water may be more dangerous than the main water.

CSO: [illegible]

[illegible] EFFECT ON INCREASE

[illegible] by [illegible] in [illegible] on [illegible]

[illegible] that year the "Salud Angel" National Institute of Hygiene has announced the production of 1.7 million units of triple vaccine and 1.7 million units of yellow antirabies vaccine, as also will increase the production of other biological products such as serums and antigens.

The president of that institute, Dr Raul Fernandez Godoy, believes that this production will not be possible to cover the needs of the country, and it also will be possible to supply the requirements which have been given, coming from the countries which are near them. In fact, the high quality of these products, which has been proved by national and international institutions, confirms the high-level position of consumption in that type of production.

In December [illegible] that the production of yellow antirabies vaccine, which has been [illegible] units, will be of ... million units. [illegible] production of antirabies vaccine will apply, by the method of [illegible] cultivation, with the planned one. Of production of which with these new [illegible] the country will have an opportunity to export this product to other countries.

We will [illegible] vaccine which is used to protect against [illegible] [illegible] and rabies. In addition to continuous and special [illegible] campaigns with the field health personnel of the SAS [illegible] and brings medical service to more and [illegible] the country. The [illegible] with [illegible] million units. A considerable increase. It has [illegible] that this and the production of 1 million units. The increase is based on the new technique of the formidable strain used, which was the award given by UNESCO [illegible] Dr. Arvelo and [illegible] Gregory.

In December [illegible] announced that the [illegible] of antivenin for [illegible] snake venom will begin. The [illegible] against is being [illegible].

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

BRIEF

[illegible] POULTRY DISEASE IN [illegible]--Another disease in poultry birds is reported to have broken out in an epidemic form throughout the subdivision and as a result hundreds of poultry birds such as cocks, hen, etc. are dying without any proper treatment. When contacted the Local Veterinary Assistant Surgeon admitted the outbreak of this disease recently in addition to which the disease was also alleged by concerned officials. Most of the newly born birds are the main victims of the disease. The owners of the poultry are of the opinion that officials of the Veterinary department should visit the rural areas with medicine and injections so that the disease can be eliminated and poor people saved from this economic loss. [Text] [Source: THE BANGLADESH TIMES in English 1 Feb 80 p 3]

[illegible] CASES TOLL OF 50,000 POULTRY BIRDS--Another disease which broke out in an epidemic form in Natore police station claimed over 50,000 poultry birds belonging to 30,000 families in the last two months. A spokesman of Natore Livestock Office told Times that due to shortage of funds adequate proper preventive measures could not be taken adding there was only three field workers for 24 Union Parishads under Natore PS. It may be mentioned here that "Livestock Protection Week" at Baraila and [illegible] Union Parishads under Natore PS which concluded recently failed to achieve the target for want of adequate vaccines. It is greatly felt that the authorities concerned should take appropriate measures to ensure steps of vaccines to save the poultry population of Natore from catching [illegible]. [Text] [Source: THE BANGLADESH TIMES in English 10 Feb 80 p 7]

CATTLE DISEASE--Cattle disease has broken out in Natore PS under Rajshahi subdivision in an epidemic form. A source said over 200 cattle heads died of cattle disease overnight. The worst affected villages are Baraspur and [illegible]. The death rate of cattle heads is increasing day by day [illegible]. [Source: THE BANGLADESH TIMES in English 1 Feb 80 p 3]

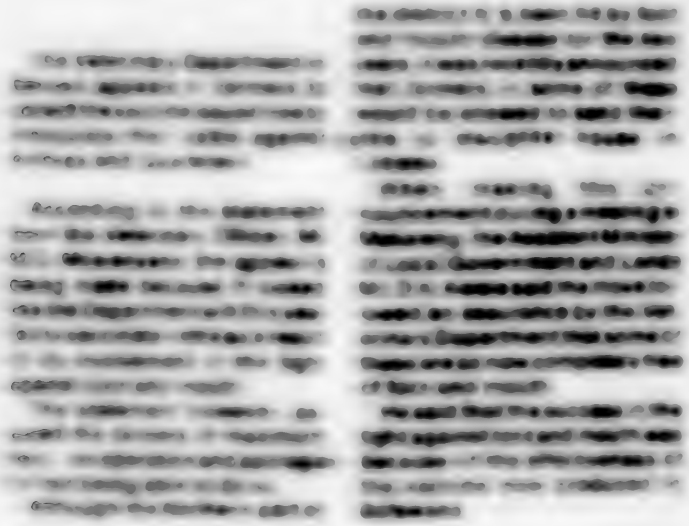
[illegible] NGOs

[illegible] CALLED UPON TO COLLECT VACCINE

[illegible] DAILY NEWS On English 10 Jan 95 p 3

Article by [illegible] Reporter

[text]



[Text illegible]

[illegible] editorial

We [illegible] think the success in the fight against foot and mouth was because of the effectiveness of the vaccine now produced in Botswana.

The outbreak of foot and mouth in the north of the Central District has forced the veterinary department to become the appeal to farmers to collect Anthrax and number cull vaccines and carry out their vaccinations.

[Ed. note]

[illegible]

[illegible]

[illegible]

[illegible]

BRIEFS

[illegible] CAMPINAS--The Campinas House of Agriculture will launch another preventive [illegible] campaign today), in the affected area, which takes in the municipios of Campinas, Salto Grande, Socorro, Sao Jose dos Bonfins, Serra Negra, Amparo, Monte Alegre do Sul, Sao Bento do Sapucai, Pedreira, Jaguariuna, Holambra, Artur Nogueira, Cosmopolis, Paulinia, Sumare, Hortolandia, Monte Mor, Indaiatuba, Elias Fausto, Capivari and Rafard, representing a herd of about 80,000 head of cattle. [Text] [Sao Paulo O ESTADO DE SAO PAULO in Portuguese 1 Feb 81 p 25] 4160

CSO: [illegible]

[illegible]

[illegible]

[illegible] [illegible] [illegible] [

[redacted]

[redacted] An Indian dairy corporation is setting up with British collaboration a Rs. 10-crore project for the production of vaccines to control the foot-and-mouth disease in cattle. Work on the project, to be established in Hyderabad, will start in the next few months, the chairman of the Indian Dairy Development Board, Dr. V. Kurien, told newsmen here today. It is proposed to produce 20 million quadrovalent vaccine doses annually to fight the disease which is causing an estimated total loss of Rs. 600 crores a year through loss milk production and draught power. [Excerpt] [Bombay THE TIMES OF INDIA in English 6 Feb 80 p 12]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

The Ministry of Agriculture and Fisheries wants to keep on to known blood or [redacted] security animal quarantine station.

[redacted]

[redacted]

[illegible]

[illegible] for the purpose of collaborating in research on the so-called "Mal de los Galpones", a cattle disease, apparently viral in nature, which is [illegible] in Cordoba, the Cargill Foundation has provided funds for the visit of Dr. [illegible] Bradfute, professor in the Vegetable Pathology Department at the Development and Research Center of Wooster, Ohio, U.S.A. Dr Bradfute is in the affected area and, together with Argentine experts, is engaged in an attempt to determine the causal agent of this disease. For this he has available the Electronic Microscopic services of the University of Cordoba. Before leaving he will give a lecture on the area of his specialization, [illegible] diseases, on 22 January at the Cargill S.A. enterprise seed processing plant in Pergamino. It will be attended by professionals specializing in this subject. [illegible] Buenos Aires LA PRENSA in Spanish [illegible] 90 Dec 89 p 8] 9254

[illegible]

[illegible] was reported that in the destruction of banana plantations in [illegible] in an attempt to control the fungus, 25 million cotton bollweevils were paid to affected growers.

An area [illegible] hectares of banana have been destroyed and the remaining [illegible] will also be destroyed.

Banana growers [illegible]

Banana farmers and their father the [illegible] in the [illegible] drought, but additional plans by each company should save their workers rather than a decision to destroy the banana groves, which [illegible]

[illegible] of an executive decree issued last October, the companies must [illegible] of money for every crate of bananas exported, to be put into a [illegible] fund for flood victims elsewhere.

The present [illegible] have no longer any reason for that contribution, because it will not be [illegible] the fungus, for which they will have to invest several million colones a year for [illegible] after the [illegible] loss of production.

-End-
[illegible]

BRIEFS

KALA-AZAR IN PONDICHERRY--Sandflies which spread Kala-azar, have been detected for the first time in Pondicherry by scientists at the Vector Control Research Centre. Kala-azar, which had been controlled in the 1960s, had reappeared in several parts of the country.--PTI [Text] [Calcutta THE STATESMAN in English 26 Jan 80 p 9]

CSO: 5400

BRIEFS

BANANA LEAF SPOT DISEASE--The Banana Company of Jamaica has announced the establishment of a new department for leafspot control and extension services. The department will be responsible for the supervision and monitoring of all aerial spraying activities, the ground inspection of banana fields, mobile spraying operations and extension programs. Already the new department is gearing itself for an intensive 9-month campaign to combat leafspot disease which is now seriously affecting the export market for bananas. A major part of the control program will be concentrated in St Mary's where three spray planes are being stationed to speed efforts to eradicate leafspot in the shortest possible time. At a news conference this morning, the managing director of the banana company, Anthony Capleton, disclosed that the company was taking over the ground spraying operations of [words indistinct] Jamaica Limited. He also dismissed the propaganda about the proposed Cuban assistance pointing out that it would save the banana company money and would not displace any workers. [Excerpts] [FL230054 Kingston Domestic Service in English 2230 GMT 22 Feb 80 FL]

CSO: 5400 END

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WORLDWIDE SERIAL REPORTS

WORLDWIDE REPORT: Environmental Quality
WORLDWIDE REPORT: Epidemiology
WORLDWIDE REPORT: Law of the Sea
WORLDWIDE REPORT: Nuclear Development and Proliferation
WORLDWIDE REPORT: Telecommunications Policy, Research and Development

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